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**** CONTINUING DATA *******

**** FOREIGN APPLICATIONS *******

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FRANCE	SHEETS DRAWING 9	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

32329

TITLE

METHOD AND SYSTEM IN AN ELECTRONIC SPREADSHEET FOR COMPARING SERIES OF CELLS

FILING FEE RECEIVED 1010	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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